



## CITY OF MORGAN HILL

17555 PEAK AVENUE MORGAN HILL CALIFORNIA 95037  
T. 408-779-7271 F. 408-779-3117

### SPORT FIELDS RESERVATION FORM PARK/FACILITY

*Must be submitted with at least 10 working days prior to requested use.*

PLEASE PRINT

Name of Individual/Group/Organization: \_\_\_\_\_

Name & Telephone Number of **Representative** for Group/Organization: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Business Phone: \_\_\_\_\_

Community Park Ballfields: Field A (adult) \_\_\_\_\_ Field B \_\_\_\_\_ Field C (adult) \_\_\_\_\_ Field D \_\_\_\_\_

Paradise Park: (Ball Field) \_\_\_\_\_ (Soccer Field) \_\_\_\_\_

Galvan Park: (Ball Field) \_\_\_\_\_ (Soccer Field) \_\_\_\_\_

Date(s) of Event: (or attach schedule) \_\_\_\_\_

Day(s) of Week: \_\_\_\_\_

Starting Time: (include prep) \_\_\_\_\_

Ending Time: (include clean-up) \_\_\_\_\_

Score Shed Key: Yes \_\_\_\_\_ Deposit Received \_\_\_\_\_

*Please note no vehicles are to be brought onto the park grass or cement pathways. A special events form needs to be completed and approved for a tournament.*

**HOLD HARMLESS AGREEMENT:**

I understand that I and my group or organization will be responsible for any damage or abuse of City buildings, grounds or equipment growing out of the occupancy or use of said premises or equipment by our reservation. We agree to abide by all rules and regulations governing the use of buildings, grounds and equipment and hold the City of Morgan Hill and their employees free and harmless from any loss, claims or liability or damage, and/or injuries to persons and property that in any way may be caused by applicants' use or occupancy of said facilities and hold harmless from all claims resulting from this use. The applicant understands the City of Morgan Hill, its officers, and employees are not responsible for any injuries or losses caused to anyone participating in any way in this activity.

I, the undersigned, have read and understand the rules and regulations for facility/park use.

Date: \_\_\_\_\_ Signed: \_\_\_\_\_

**FOR OFFICE USE ONLY**

Date Application Received: \_\_\_\_\_

Facility/Park: \_\_\_\_\_ is available \_\_\_\_\_ is not available

Additional Personnel Required: \_\_\_\_\_

Requires: open/close \_\_\_\_\_ Other: \_\_\_\_\_

Assignment of Personnel: \_\_\_\_\_

Insurance Coverage Required: Yes: \_\_\_\_\_ No: \_\_\_\_\_ Verified by: \_\_\_\_\_ Date: \_\_\_\_\_

Security Coverage Required: Yes: \_\_\_\_\_ No: \_\_\_\_\_ Verified by: \_\_\_\_\_

Approval: \_\_\_\_\_ Denied: \_\_\_\_\_

If denied, reason why: \_\_\_\_\_

City Representative: \_\_\_\_\_ Date: \_\_\_\_\_